

| POSITION | INITIALS | PD NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | T.D. | | 4/19/99 |
| O.I.P.E. CLASSIFIER | | 10 | 4-26-99 |
| FORMALITY REVIEW | DD | 08972 | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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